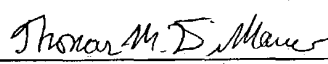


Please type a plus sign (+) inside this box +

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  <small>(only for new nonprovisional applications under 37 CFR 1.53(b))</small>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Attorney Docket No.</td> <td style="padding: 2px;">DEP5118</td> </tr> <tr> <td style="padding: 2px;">First Inventor</td> <td style="padding: 2px;">John R. Hawkins</td> </tr> <tr> <td style="padding: 2px;">Title</td> <td style="padding: 2px;">Dual Durometer Elastomer Artificial Disc</td> </tr> <tr> <td style="padding: 2px;">Express Mail Label No.</td> <td style="padding: 2px;">EU486915066US</td> </tr> </table>	Attorney Docket No.	DEP5118	First Inventor	John R. Hawkins	Title	Dual Durometer Elastomer Artificial Disc	Express Mail Label No.	EU486915066US
Attorney Docket No.	DEP5118									
First Inventor	John R. Hawkins									
Title	Dual Durometer Elastomer Artificial Disc									
Express Mail Label No.	EU486915066US									
<b>APPLICATION ELEMENTS</b>  See MPEP Chapter 600 concerning utility patent application contents.		<b>ADDRESS TO:</b> MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450								
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(submit an original and a duplicate for fee processing)</small> 2. <input type="checkbox"/> Applicant claims small entity status. 3. <input checked="" type="checkbox"/> Specification [Total Pages 14] <small>(Preferred arrangement set forth below)</small> - Descriptive Title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 3] 5. Oath or Declaration [Total Pages 3] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. <input type="checkbox"/> Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statement verifying identity of above copies  <b>ACCOMPANYING APPLICATION PARTS</b> 9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (when there is an assignee) 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Request and Certifications under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input checked="" type="checkbox"/> Other—Certificate of Mailing ---Second set of Drawings Submission of Formal Drawings								
18. <input type="checkbox"/> If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-Part (CIP) of prior application No.: , filed Prior application information: Examiner Group Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.										
<b>19. CORRESPONDENCE ADDRESS</b> <input checked="" type="checkbox"/> Customer Number or Bar Code Label <b>000027777</b> or <input type="checkbox"/> Correspondence Address below Name: Philip S. Johnson, Esq. Address: Johnson & Johnson One Johnson & Johnson Plaza New Brunswick, NJ 08933-7003 USA										
<b>20. TELEPHONE CONTACT</b> Please direct all telephone calls or telefaxes to Thomas M. DiMauro at: Telephone: (508) 880-8401 Fax: (508) 828-3789										
<b>21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED</b>										
NAME	Thomas M. DiMauro Reg. No. 35,490									
SIGNATURE										
DATE	6.26.03									

13408 U.S. PTO 10/608987



<b>FEE TRANSMITTAL</b>	<i>Complete if Known</i>	
	Application Number	
	Filing Date	
	First Named Inventor	John R. Hawkins
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	DEP5118

### FEE CALCULATION

#### CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE
				\$710.00
TOTAL CLAIMS	29 - 20 =	9	x 18.00	\$162.00
INDEPENDENT CLAIMS	3 - 3 =	0	x 80.00	\$0.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$270.00	
			TOTAL FEES	\$872.00

### METHOD OF PAYMENT

☒ Please charge Deposit Account No. 10-0719/DEP5118TMD in the amount of \$872.00.  
Three copies of this sheet are enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/DEP5118/TMD. Three copies of this sheet are enclosed.

<b>SUBMITTED BY:</b>		<i>Complete (if applicable)</i>
Typed or Printed Name	Thomas M. DiMauro	Reg. No. 35,490
Signature	<i>Thomas M. DiMauro</i>	Date: 6-26-03
		<b>Deposit Account No. 10-0750</b>

DOCKET NO. DEP5118

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: John R. Hawkins

For : Dual Durometer Elastomer Artificial Disc

Express Mail Certificate

"Express Mail" mailing number: EU486915066US

Date of Deposit: 6/26/03

I hereby certify that this complete application, including specification pages, claims, formal drawings, Declaration and Power of Attorney, and Assignment, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

Karen Day

(Typed or printed name of person mailing paper or fee)

*Karen Day*

(Signature of person mailing paper or fee)